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____ Yes ___ No ____ Yes ___ No

03-IMP-035 COMBINED DECLARATION AND POWER OF ATTORNEY (ORIGINAL, DESIGN, NATIONAL STAGE OF PCT) As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name, I believe I an first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plu listed below) of the subject matter which is claimed and for which a patent is sought on the invention MECHANICAL OSCILLATOR FOR WAFER SCAN WITH SPOT BEAM Title: the specification of which X is attached hereto. (a) as Serial No. was filed on ___ (b) as Serial No. not yet known, and was amended or Express Mail No._ (if applicable). was described and claimed in PCT International Application No. (c) on ______ and amended under PCT Article 19 on ___ I hereby state that I have reviewed and understand the contents of the above identified specification claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability in accordance with of Federal Regulations §1.56(a). PRIORITY CLAIM I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign ap patent or inventor's certificate or of any PCT international application(s) designating at least one co the United States of America listed below and have also identified below any foreign application(s inventor's certificate or any PCT international application(s) designating at least one country other States of America filed by me on the same subject matter having a filing date before that of the app which priority is claimed; also I hereby claim the benefit under 35 USC 119(e) of any United State application(s) that is/are listed below: (d) X no such applications have been filed. (e) ___ such applications have been filed as follows. EARLIEST PROVISIONAL OR FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MO (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION PRIORITY CLASMED DATE OF FILING APPLICATION NUMBER COUNTRY **UNDER 35, USC 119** (day, month, year)

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Thomas G. Eschweiler, Reg. No. 36, 981 Eric M. Highman, Reg. No. 43,672 Gregory J. Adams, Reg. No. 44,494 William J. Cooper, Reg. No. 44,629 John D. Beinhardt, Reg. No. 54,988 Denis Robitaille, Reg. No. 34,098

The undersigned to this declaration and power of attorney hereby authorizes the U.S. attorney(s) named herein to accept and follow instructions from Name(s) of authorized representative(s)_ Address_ as to any actions to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney(s) and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorney(s) will be so notified by the undersigned. Direct Telephone Calls To: Send Correspondence To: (name and telephone number) Thomas G. Eschweiler Thomas G. Eschweiler ESCHWEILER & ASSOCIATES, 11C (216) 502-0600 National City Bank Building 629 Euclid Avenue, Suite 1210 Cleveland, Ohio 44114 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued therein. Full name of sole or first inventor_ Inventor's signature: Country of Citizenship: Shrewsbury, Massachusetts 1 Birch Brush Road Post Office Address: Shrewsbury, Massachusetts 01545 Kurt D. Cleveland Full name of second joint inventor, if any: Inventor's signature:_ Country of Citizenship: U.S.A Date: 374/04 Beverly, Massachusetts Residence: 7 Richards Road Post Office Address: Beverly, Massachusetts 01915

CHECK FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION

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X This declaration ends with this page.